

L12000013849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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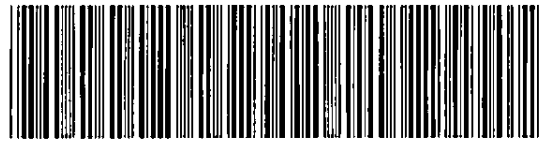
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: **DE SARRO GROUP, LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KYLE BECKMANN

Name of Person

BK AUDIT LLC

Firm/Company

255 SW 14TH PL

Address

BOCA RATON FL, 33432

City/State and Zip Code

KYLE@BKAUDITGROUP.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KYLE BECKMANN

516 850-8990
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DE SARRO GROUP, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/30/2012 and assigned Florida document number 1.12000013849.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

255 SW 14TH PL.

(Principal office address MUST BE A STREET ADDRESS)

BOCA RATON FL, 33432

Enter new mailing address, if applicable:

255 SW 14TH PL.

(Mailing address MAY BE A POST OFFICE BOX)

BOCA RATON FL, 33432

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

KYLE BECKMANN

New Registered Office Address:

255 SW 14TH PL.

Enter Florida street address

BOCA RATON

City

Florida 33432

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

DocuSigned by:

Kyle Beckmann

71419C93FB804DB
If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	DE SARRO, DANIEL E	MAIPU 7666	<input type="checkbox"/> Add
		MAR DEL PLATA, BA 7600 AR	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LOPEZ, ADRIANA P	LARREA 1110	<input type="checkbox"/> Add
		MAR DEL PLATA, BA 7600 AR	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DE SARRO, LUCIO M	MARCOS SASTRE 1737	<input type="checkbox"/> Add
		MAR DEL PLATA, BA 7600 AR	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DE SARRO, SILVANO M	MORENO 2879	<input type="checkbox"/> Add
		MAR DEL PLATA, BA 7600 AR	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ADOBBATI, ADALBERTO	4566 BRADY LN	<input type="checkbox"/> Add
		PALM BCH GARDENS, FL 3341	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
P	BECKMANN, KYLE	255 SW 14TH PL	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33432	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

